



**ARS Medical, PLLC. dba ARS Medical Primary Care
Privacy Practices**

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MEDICAL PRIVACY PRACTICES

Effective Date: 03/08/2024

I. Introduction

A. Purpose

This document outlines the privacy practices of ARS Medical, PLLC. dba ARS Medical Primary Care concerning the use and disclosure of patients' protected health information (PHI) in compliance with applicable laws, including the Health Insurance Portability and Accountability Act (HIPAA).

B. Our Commitment to Your Privacy

We are dedicated to maintaining the privacy and security of your medical information. This notice explains your rights and our obligations regarding your PHI.

II. Uses and Disclosures of Medical Information

A. Treatment, Payment, and Healthcare Operations (TPO)

We may use and disclose your medical information for TPO purposes, such as treatment, payment, and healthcare operations, as explained in more detail in the accompanying Privacy Practices.

B. Other Uses and Disclosures

Your medical information may also be used or disclosed for purposes beyond TPO with your written authorization or as required by law.

III. Your Rights Regarding Medical Information



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A. Right to Access and Obtain a Copy

You have the right to access and obtain a copy of your medical information with certain exceptions.

B. Right to Amend

If you believe your medical information is incorrect, you have the right to request an amendment.

C. Right to an Accounting of Disclosures

You have the right to request an accounting of certain disclosures of your medical information.

D. Right to Request Restrictions

You can request restrictions on certain uses and disclosures of your medical information.

E. Right to Confidential Communication

You have the right to request confidential communication of your medical information.

F. Right to File a Complaint

If you believe your privacy rights have been violated, you have the right to file a complaint with NC DHHS Mailing Address 2001 Mail Service Center Raleigh, NC 27699-2000 ; Physical Address 101 Blair Drive Raleigh NC 27603 ; **Administrative Assistance: 919-855-4800.**

IV. Our Responsibilities

A. Privacy Officer



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For any questions or concerns about this Notice, please contact our Privacy Officer:
Jessica Brooks ,PCP, 8824 E Bellhaven blvd Charlotte, NC 28214, (704) 595-3742 ,
info@arsmedicalpllc.com

B. Changes to this Notice

We reserve the right to change this Notice. Any changes will be effective for all medical information we maintain.

V. Acknowledgment of Receipt

I acknowledge that I have received a copy of the Medical Privacy Practices from ARS Medical, PLLC. dba ARS Medical Primary Care

Patient Name: _____

Signature: _____

Date: _____